

SUPERVISING CREMATORY OPERATOR AGREEMENT FORM

(10-1) "Supervising Crematory Op operator and who is responsible to compliance with the Cremation Sta	the Maryland Board of M	Morticians and Funera	al Directors for	
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ICrematory Supervisor I shall be the crematory supervisory conducted within the crematory an advertisements made in connection on an as-needed bases to perform bodies by cremation.	of said crematory and shed throughout its entire sc with said permit. I furth	all, therefore, be responded on the responder of services included that I seems tha	onsible for all transactions ling responsibilities for all shall be physically present	
I agree that I shall be personally re	sponsible for cremations	serviced by:		
the facility. I further agree that the conducted strictly in compliance w Statue, Title 5 Section 450, Health and all applicable Federal Trade C for the acceptance of such responsi and Funeral Directors.	with the laws of the State General, Maryland Ann Commission and OSHA r	er this permit shall be of Maryland, in parti- otated Code and the cules. I further affirm	cular, with the Crematory orresponding regulations, that should my authority	
	Signa	Signature of Crematory Supervisor		
STATE OF MARYLAND CITY/O	COUNTY OF:			
I hereby certify that on this	day of	, 20	, before me a Notary	
Public of the State and County afor	resaid, personally appear	red:		
and made oath in due form of law	that the foregoing			
Was his/her voluntary act and deed	1.			
AS WITNESS my hand and Notar	ial Seal.			
		Notary Public		
My commi	ssion Expires:		_	

Maryland Board of Morticians and Funeral Directors 4201 Patterson Avenue, Unit 86, Baltimore Maryland 21215